

UNITED STATES DISTRICT COURT

for the
Northern District of Mississippi
Greenville Division

JERRY WAYNE ROLAND)

Plaintiff)

v.)

HUMPHREYS COUNTY, MISSISSIPPI, et al.)

Defendants)

Civil Action No. 4:12-cv-00099-GHD-DAS

(If the action is pending in another district, state where:)

**SUBPOENA TO PRODUCE DOCUMENTS, INFORMATION, OR OBJECTS
OR TO PERMIT INSPECTION OF PREMISES IN A CIVIL ACTION**

To: Indianola Police Department
Attention: Police Chief
300 Second Street
Indianola MS 38751

☒ **Production:** YOU ARE COMMANDED to produce at the time, date, and place set forth below the following documents, electronically stored information, or objects, and permit their inspection, copying, testing, or sampling of the material:

A "CERTIFIED" copy of any and all records, files and documents on any investigation, arrests, charges or information on Jerry Wayne Roland.

Place: This Subpoena maybe complied with by mailing documents to Phelps Dunbar Law Firm, Attention: Sally Barnett, P.O. Box 16114, Jackson MS 39236

Date and Time: 6/14/13 9:00 a.m.

☐ **Inspection of Premises:** YOU ARE COMMANDED to permit entry onto the designated premises, land, or other property possessed or controlled by you at the time, date, and location set forth below, so that the requesting party may inspect, measure, survey, photograph, test, or sample the property or any designated object or operation on it.

Place:

Date and Time:

The provisions of Fed. R. Civ. P. 45(c), relating to your protection as a person subject to a subpoena, and Rule 45 (d) and (e), relating to your duty to respond to this subpoena and the potential consequences of not doing so, are attached.

Date:

6/3/13

CLERK OF COURT

OR

Signature of clerk or Deputy Clerk

Attorney Signature

The name, address, e-mail, and telephone number of the attorney representing (name of party)

Defendants Humphreys

County, MS, Sheriff J.D. Roseman, and Deputy Sam Dobbins

, who issues or requests this subpoena, are:

Jason T. Marsh; MB #102986; 4270 I-55 North; Jackson, MS 39211-6391; 601-352-2300; jason.marsh@phelps.com

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PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)*

This subpoena for (name of individual and title if any) Indianola Police Department
was received by me on (date) 6/3/2013

☒ I served the subpoena by delivering a copy to the named person as follows: by "Certified"
MAIL with the U.S. Postal Service
on (date) 6/3/2013 ; or

☐ I returned the subpoena unexecuted because: _____

Unless the subpoena was issued on behalf of the United States, or one of its officers or agents, I have also
tendered to the witness fees for one day's attendance, and the mileage allowed by law, in the amount of
\$ 0

My fees are \$ 0 for travel and \$ 0 for services, for a total of \$ 0

I declare under penalty of perjury that this information is true.

Date: 6/3/2013

Sally Barnett
Server's signature
SALLY BARNETT - Paralegal
Printed name and title

4270 I-55 N. JACKSON MS 39211
Server's address

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input checked="" type="checkbox"/> Addressee</p> <p>C. Date of Delivery 6-4-13</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>Indiansola Police Dept. Attn: Police Chief 300 Second St. Indiansola, MS 38751</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
		<p>7011 3500 0002 3028 4912</p>	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	